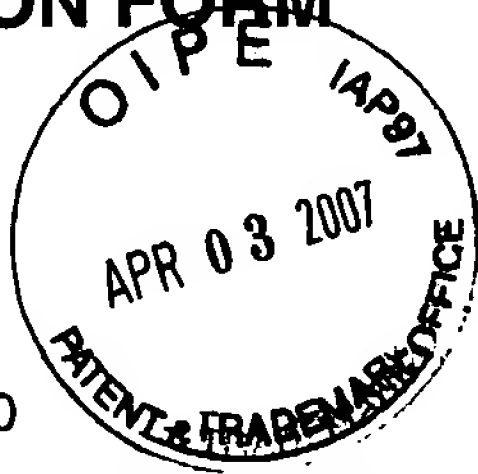


IFW

POWER OF ATTORNEY AND CORRESPONDENCE ADDRESS INDICATION FORM

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Application Number	09/683,093
Filing Date	11/16/2001
First Named Inventor	Roland R. THOMPSON et al.
Title	Substitute fulfillment system
Art Unit	3623
Examiner Name	Tarae, Catherine Michelle
Attorney Docket No.	FLD0001-CIP2

I hereby revoke all previous powers of attorney given in the above-identified application.

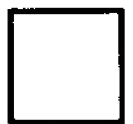
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Practitioners associated with the CUSTOMER NUMBER:

OR

21967



Practitioner(s) named below:

Name	Registration Number

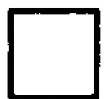
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature		Date	3/8/07
Typed or Printed Name	MICHAEL BLACKSTONE	Telephone	610-722-5215
Title and Company	PRESIDENT FRATERNAL PROMOTION TECHNOLOGIES		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.



*Total of _____ forms are submitted.